

MINUTES
of a meeting of the Governance Committee
12 January 2021
(11:00-12:20)

Meeting held by video conference call

Present:

Anne-Marie Dean, Chairman
Ian Buckmaster, Company Secretary
Carole Howard, Office Administrator

Carol Dennis, Jenny Gregory, Dawn Ladbrook, Di Old and Val Perry, Members

1 Welcome and apologies

The Chairman welcomed all participants to the video conference.

An apology was received for the absence of Bev Markham.

2 Declarations of interest

There were no declarations.

3 Minutes of meeting held 13 October 2020

The minutes of the last meeting were agreed as a correct record and the Chairman was authorised to sign them in due course.

4 Board meeting, 10 December 2020

Draft minutes of the Board meeting held on 10 December were received and noted. There were no matters arising.

5 Finance report

The report for December was presented.

The average monthly expenditure this month for the year to date had been £9,232, which remained below the five-yearly average but continued to rise. Actual spending in December was £10,287, in line with previous monthly average expenditure. A total of £853 had been spent in the year to date in dealing with the consequences of Covid-19.

December's expenditure included the cost of modest Christmas gifts (instead of a Christmas function, rendered impossible by Covid-19 restrictions) and staff overtime payments in connection with implementing the new website and some survey work.

A minor adjustment in accounting practice had transferred some expenditure for the year (not in December) from Management costs to Public Consultation costs. This has also resulted in Office Costs for Public Consultations appearing as -£50: this was because the cost of work done by another Healthwatch on our behalf turned out to be £50 less than budgeted for. This negative cost would be removed at year-end.

Since April, the Savings Account had held money set aside for future winding-up costs as a strategic reserve, £4,160. From 1 January to 31 March, the amount in the account was £10,000. Despite these not inconsiderable sums, the total interest earned for the year turned out to be just £8.48.

Current indications are that (disregarding any potential income) the likely end-of-year surplus could be of the order of £3,400. Last year, £100 for postage was pre-paid, to leave a good size float. In the event, so few letters had been sent during this past year that more than £90 of that pre-payment remained available.

6 Office move

The Committee noted that the office move had now been completed (albeit that the office would now remain closed until further notice as a result of the current lockdown). The new accommodation had slightly more space available than in the old office, and it was also possible to use an adjoining meeting room for activities such as training.

Some minor expenditure had been incurred, mainly in replacing the refrigerator, which had become faulty.

The Board thanked Carole Howard and Ian Buckmaster for their work in getting the office ready for use.

7 Engagement projects

Oral updates were given on the following projects:

- **St George's Centre development** – an emerging issue was whether a bus turnaround would be essential, given the space needed for it. The Committee felt that, realistically, more space would be needed for car parking if adjoining streets were not to be clogged by people parking and

walking to the centre, especially those who had disabilities (likely to be a significant proportion of attendees).

- **Audit of GP websites** – the report was being finalised for publication shortly. The CCG were interested in the findings and had already thanked us for providing some raw data in connection with their digital exclusion project. Recommendations were likely to be made to the CCG and to NHS England (via Healthwatch England) that Gps be required to have good quality websites, especially if the objective of digitising the NHS were to be achievable.
- **Patient Champions** – the Committee noted that Healthwatch Barking & Dagenham had approached us to enquire whether we would be interested in joining them in a project to develop Patient Champions. The Chairman had declined to do so as the volume of work currently in hand left insufficient capacity to handle the additional workload.
- **Recruitment** – the Committee noted the current position about the recruitment of volunteers.

8 Improving the reach of Healthwatch Havering

Further to previous reports, it was noted that the preparation of the new website continued with a view to it going live in a couple of months.

Consideration would be given to re-activating the Twitter account and creating an Instagram account. It was agreed that the creation of a Facebook account would not be pursued.

9 Other business

- **Care Provider Forum** – the Chairman reported that, at a meeting of the Forum last week, it had been noted that Redbridge had 75 care homes with about 1,260 residents whereas Havering had 63 homes but some 1,600 residents. The Covid-19 Vaccination programme within homes was now proceeding but staff testing was proving more time consuming than expected and affecting handover times, and there was concern about the accuracy of those tests. Some staff were refusing to be vaccinated.

Arrangements for GPs to monitor residents remotely using diagnostic equipment operated by staff and video conferencing would be available in all homes by the end of March. Homes were asking for flow charts of the hospital discharge process to be provided.

Care home staff were becoming exhausted but were reluctant to seek help with their mental health as they did not think the general mental health service would be understanding of their specific needs.

- **Covid vaccination programme** – a Healthwatch volunteer had raised questions about seeming inconsistencies in the delivery arrangements for vaccinations. It was noted that, in some cases, residents of Barking & Dagenham were being offered at facilities in Havering that were not available to Havering residents. The Chairman had sought an explanation for this from Havering Council, whose prompt response indicated that the issue was being looked into with some urgency.
- **Discharge to Assess (D2A) scheme** – it was not clear whether the D2A was still operating or had been suspended given the current Covid-19 situation. Further enquiries would be made.
- **Phlebotomy** – the Chairman reported that, as a result of the current Covid-19 situation, the Working Group overseeing the response to the serious incident regarding Phlebotomy services had been put on hold for a few weeks. The issue of whether clinical harm had resulted from the unexpected delays in arranging blood tests would be hard to ascertain; the pathology laboratory had no data on why a test had been ordered, only on its findings so it was unable to state whether an earlier test would have assisted a diagnosis. Overall, the system was now running well and sessions were proceeding as planned. GPs were being urged to continue to order tests as required.
- **Covid-19 testing** – Ms Old reported that she had taken a Covid-19 home test. The test kit had been accompanied by a 21-page booklet of instructions and, although delivery of the kit to her had been efficient, the return arrangements were unnecessarily complicated; she had found the whole process overly bureaucratic.

10 Next meeting

The next meeting would be held on Tuesday, 9 February 2021.

Chairman